

MICHIGAN LONG-TERM CARE SUPPORTS & SERVICES
ADVISORY COMMISSION MEETING
Minutes of Monday, January 25, 2010
Capitol View Building, Lansing, Michigan

I. Roll Call

Members Present

Mary Ablan
RoAnne Chaney – Chair
Chris Chesney
Connie Fuller
Sharon Mack
Yolanda McKinney
Jonathon Mead
Tom Rau
Hollis Turnham
Cyndy Viars (telephone)
Toni Wilson

Members Excused

Robert Allison
Dohn Hoyle
William Mania
Denise Rabidoux

Members Absent

Marcia Moers

Ex-Officio Members Present

Dell Alston, Designee for DELEG Director (telephone)
Barbara Anders, Designee for DHS Director (Represented by Rachel Richards)
Peggy Brey, OSA Deputy Director and Designee for DCH Director
Sharon Gire, Director, Office of Services to the Aging
Sarah Slocum, State Long-Term Care Ombudsman

Staff

Pam McNab, Manager, Long-Term Care System Transformation Section, OSA
Gloria Lanum, Long-Term Care System Transformation Section, OSA

II. Commission Changes

Commission Chair RoAnne Chaney opened the meeting as the newly designated Chairperson of the Michigan Long-Term Care Supports and Services Advisory Commission. A moment was taken to express sympathy for the loss of Commissioner William Gutos. The departing Commissioners, Andrew Farmer, Jon Reardon, Reverend Charles Williams and Linda Ewing, were thanked for their dedication and work. The new members were welcomed, Mary Ablan, Sharon Mack, Jonathon Mead, and Tom Rau.

III. Review and Approval of November 23, 2009 Minutes

MOTION: Commissioner Turnham moved to approve the Minutes of November 23, 2009 as presented. Commissioner Ablan seconded the motion. Motion carried.

IV. Review and Approval of Agenda – No changes made.

MOTION: Commissioner Rau moved to approve the Agenda as presented. Commissioner Fuller seconded the motion. Motion carried.

V. Medicaid Long-Term Care Policy Update

Susan Yontz, Manager of the Long-Term Care Policy Section in Medicaid, provided an update on Medicaid Policy Letters and Bulletins: L 09-33, L 09-36, MSA 09-56, 09-59, 10-03 and 10-04. The bulletins are posted on the MDCH website. One of the primary jobs currently being worked on is the CHAMPS billing system. Service requests are being addressed and changes are continuing to be made. The patience that providers have been exhibiting is appreciated. The Section is working with the hospice organizations regarding patient payment amount and with nursing facilities and hospice enrollment. Additionally, staff is working on the Adult Services Authorized Payments (ASAP) paperless billing system and on a policy letter to provide to the waiver agency CILS on reviewing nursing facility transitions. Soon a provider agreement will be completed for Home Help providers. This year, nursing facilities will be moving from MDS 2.0 version to 3.0. This has been a major CMS project for a number of years. This change will take place on October 1, 2010. Further details will be provided about training. The Section is also working closely with the Actuarial Division.

VI. MI Choice Waiver Program/Nursing Facility Transitions/Money Follows the Person Updates

Michael Daeschlein, Manager of the Home and Community-Based Services Section, Medical Services Administration provided an update on Section initiatives. This Administration has been very supportive of home and community-based services by providing increases in MI Choice funding. Some appropriated funds are specified for certain programs such as MI Choice in licensed settings, affordable assisted living project, and MFP grant. Last year, enrollments for MI Choice over 10,000 people were served. More than that will be served this year. A priority this year is to have better data on the MI Choice waiting list. The average length of time on the waiting list is ~3 months. This varies across the state. In regards to quality of MI Choice, the U of M School of Nursing did not renew their contract for conducting the clinical reviews for the MI Choice Program. Beginning FY 2009, this work is being done through a contract with the Michigan Public Health Institute. The nurse reviewers are all former MI Choice employees. In addition, a methodology has been developed for conducting administrative reviews.

The MI Choice in Licensed Settings was implemented as of July 1, 2009 for the purpose of providing MI Choice to residents of licensed adult foster care and homes for the aged. More work needs to be done on the provider side to help people understand what this means to an AFC operator. It was suggested that data be collected on how many people have been enrolled in MI Choice licensed settings especially since there is a separate budget line item for that project.

Michael explained the methodology of factors used to determine an agency's portion of SCORE (Support Coordination and Operations Reimbursement) funds for MI Choice. During FY 2009, the total number of nursing facility transitions was 879 with 656 to the MI Choice Program, 76 to AHH, and 147 did not meet either program. So far in FY 2010, 303 have transitioned with 250 to MI Choice, 14 to AHH and 39 other. It is expected that 1,200 will be transitioned this year. Transition services still vary from service area to service area. Ellen Speckman-Randall is working with service areas who are not performing as well. The goal is to get all waiver agencies doing well and to make sure that nursing home residents know about options and to have access to services that are available. Money Follows the Person is a subset of transition activities. MFP candidates are not targeted but are responded to by referrals and those who express interest. This will capture enough people to fulfill grant goals. The benchmark for calendar year 2009 was 300 and this year it's 500. Of the 1,200 to be transitioned this year, the hope is 500 will be MFP transitions. The MFP grant gives access to federal match money that provides funding for housing coordinators and training with waiver agents and CILS. Another project lead by Dan Milne is looking at the implementation of MDS 3.0 Q-1-A item that asks the question about transition services. Michigan is one of the states who volunteered to this pilot project.

Commissioner Turnham mentioned that she is working with Ellen on another quality project to survey workers assisting self-directed consumers who are not using an agency. There is a database of over 1,500 workers, largely in the MI Choice Program through self-directed services. It's hopeful that CMS will invest funds to support the survey. As of December 31, 2009, 1,482 MI Choice participants are using self-directed services.

VII. Public Comment – None

VIII. Executive Committee Report

On behalf of the remaining members of the Executive Committee (Commissioners Turnham, Chesny and Chaney), Commission Chair Chaney recommended new Executive Committee membership as follows: Jonathon Mead as Vice Chair, Chris Chesny as Secretary, and Tom Rau and Dohn Hoyle as members.

MOTION: Commissioner Turnham moved to approve the new Executive Committee membership as recommended. Commissioner Fuller seconded the motion. Motion carried.

The direction of the Commission was discussed. Commissioner Turnham stated that several of the Task Force recommendations have been implemented and progress on others. A lot of work and emphasis has been on budget issues which caused some frustration of not having much, if any, impact in the legislature. Commissioner Chesny added that efforts should be focused on areas where the Commission can be effective such as policy. Other productive areas include quality issues across the array of LTC supports and services, person-centered planning and forming stronger relationships with other parts of DCH, DHS and DELEG to look at policy issues and public education and improved access.

The Commission, created by a Governor's executive order, could end January 1 with a new Governor's Executive Order. A course needs to be plotted in order to maximize time. The new Executive Committee will work on the direction of the Commission.

IX. LTCSS Provisions in the National Health Care Reform Debate – A Synopsis

Pam McNab, Manager of the Long Term Care System Transformation Section, Office of Services to the Aging, presented a walk-through of the synopsis and highlighted sections of the Senate and House health care reform bills; particularly long-term care supports and services provisions linking them with any Task Force recommendations. The synopsis was developed in response to a request made by the Commission at the November 2009 meeting. The SCAN Foundation policy brief was used as a reference and the Comments are from the National Senior Citizens Law Center.

Discussion and comments were provided on the following issues: the CLASS Act, removal of barriers to providing HCBS, extending the MFP demonstration project, funding to expand ADRCs, improved coordination and protection for dual eligibles, establishing a Center for Medicare & Medicaid Innovation, demonstration programs and new delivery models to reward Accountable Care Organizations, pay medical homes for chronic care services, Independence at Home Demonstration Program, implementation of medication management services in treatment of chronic disease, Community Based Collaborative Care Networks, Community Base Care Transitions Program, establish demonstration projects to address health professions workforce needs, training opportunities for direct care workers, expanding physician assistants' role to order skilled nursing facility care, payment incentives for selected primary care services, geriatric education and training, establish committee on health workforce evaluation and assessment, and strengthening quality and consumer protections (state LTC Ombudsman, background checks, abuse prevention, "culture change", elder justice). As cost containment, the Senate Bill proposes as part of reducing waste, fraud and abuse in public programs a provision to develop a database to capture and share data across federal and state programs. This is an idea that has been piloted in Michigan in the mental health system. This is something that we need to do.

X. Commission Discussion

A) Workgroup Updates

Workforce Development – Commissioner Turnham shared that two recommendations are moving forward, 1) the workgroup is working with the department to look for funds to support a feasibility study to look at a Medicaid rate enhancement that would help long-term care employers to offer affordable, accessible, and adequate health insurance to their employees, and 2) the workgroup is working with the department, through the State Profile Grant, to analyze DCH, DHS and DELEG databases to secure baseline data in terms of how large is the long-term care workforce, what are the average compensation rates, and what is the stability of the workforce (turnover rates/vacancy rates).

Prevention Workgroup (includes health promotion, chronic care management and caregiver support) – A meeting is scheduled in February.

Person-Centered Planning – Progress is being made.

Commission Chair Chaney asked that the Commissioners to review the work of the workgroups and their charges and provide any recommend changes or how to reconfigure them.

B) March Agenda Items

The following items were suggested: Workgroup charges and status, Medicaid Long-Term Care Policy Update--Susan Yontz, MI Choice Waiver Program Update--Michael Daeschlein, OSA Community Living Partnership (Nursing Home Diversion Project), summary of the Task Force recommendations that have been implemented, and a presentation on the Governor's budget.

C) Action Item

Commissioner Mead recommended that the Commission change the meeting date from Monday due to traveling from the U.P. A poll will be conducted to see if another day will work better for all members.

XI. Adjournment

The next meeting is Monday, March 22, 2010 from 10:00–3:00 p.m. in Lansing at the Capitol View Building, 201 Townsend Street, 1st Floor Conference Center. Commission Chair Chaney announced that with no further business to come before the Commission, the meeting has been completed.

MOTION: Commissioner Turnham moved to adjourn the meeting, seconded by Commissioner Wilson. Motion carried. The meeting was adjourned at 3:00 p.m.